

(1) PLACE OF BIRTH

County of Cherokee
 Township of Doughtonville
 or
 Inc. Town of N. E. 6
 or
 City of _____

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
 Bureau of Vital Statistics
 State Board of Health

File No.—For State Registrar Only

10411

Registration District No. 10001 Registered No. 24
 (For use of Local Registrar)

(If birth occurs in a hospital or other institution give name of same instead of street and number.)

(2) Full Name of Child Brody Littlejohn If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH (Name of Month) (Day) (Year) June 22 1922

FATHER.

(8) FULL NAME Eduff Littlejohn
 (9) PRESENT POSTOFFICE OF FATHER Gwynn St. 5
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 30 (Years)
 (12) BIRTHPLACE Cherokee Co. S. C.
 (13) OCCUPATION Laborer
 (20) Number of children born to mother, including present birth 8

MOTHER.

(14) NAME BEFORE MARRIAGE Samie Montgomery
 (15) PRESENT POSTOFFICE OF MOTHER None
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 24 (Years)
 (18) BIRTHPLACE None
 (19) OCCUPATION Domestic
 (21) Number of children of this mother now living, including present birth 7

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(22) I hereby certify that I attended the birth of this child, who was born at P. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) James S. S.
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Gwynn St. 5

(Given name added from a supplemental report)

(26) Witness James H. McWhorter
 (Signature of Witness necessary only when question 23 is signed by mark)

(27) File May 9 1922 (28) M. B. Dennis Local Registrar

*When there was no attending physician or midwife, then the father, householder, etc., should make this return. If a child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.

*When there was no attending physician or midwife, then the father, householder, etc., should make this return. If a child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.

RECORDS OF SOUTH CAROLINA, COLUMBIA, S. C.
 STATE OF SOUTH CAROLINA, COLUMBIA, S. C.
 PRINTED BY THE STATE OF SOUTH CAROLINA, COLUMBIA, S. C.
 STATE OF SOUTH CAROLINA, COLUMBIA, S. C.